L	Substitute for Form PTO-875									Application or Dockel Number		
19/08/1469												
L	·	CLAIMS AS FILED - PART ( (Column 1) (Column 2)					SMALL ENTITY		0	OTHER THAN		
	FOR ASIC FEE		UMBER FILE	EO . N.	MBER EXTRA		RATE	FEE		RATE	· Fil	
	TAL CLAIMS				-	_		s	0			
(3	7 CFR 1.16(c))	-1.5	O minus	20 =	30	7	x,25			·		
(3 (3	DEPENDENT CL CFR 1.16(b))	AIMS Z	minus	3 :	<u>,,                                    </u>	7	x ; 100		<b>⊣</b> °'	200		
м	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+:180	<del> </del>	OF	3/00		
"If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL	<del></del>	.   OF		-	
								L		TOTAL	L	
CLAIMS AS AMENDED - PART II												
_	11/2/06	(Column 1)		(Column 2	(Column 3)		SMALL	ENTITY	OR		ER THAN L ENTITY	
AMENDMENT A		REMAININ AFTER AMENOMEN	· 1.	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	].	RATE	ADO-	
	Total (31 CFR 1.16(c))	1.18	Minus		1-0	11	× , 25 .		OR	× 50 =	FE(	
MEN	Independent (37 OFR 1.166))	1 3	.Minus	" 4	] <del>-</del>	] [	x s_100=		OR	x , 200		
₹	FRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 OFR 1.16(4))						+ 5 180=		OR	+ 312	1	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	·	
		(Column 1)		(Column 2)				-		<u> </u>		
AMENOMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
	क्षिण म्हली हुवाज्ञ		Minus		· .		.,25.		OR	x : 50=	FEE	
ÆN	Independent (37 CFR 1_16(b))		Minus		•		(s100:	• .	OR -	x s 200		
र्दे	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							•	OR	+360		
					,		OTAL VOO'L FEE		OR	TOTAL ADD'L FEE		
	<u> </u>	(Column 1)		(Column 2)	(Column 3)							
ENDMENT C		CLAIMS ' REMAINING AFTER AMENOMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	$\cdot \int$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
2	Total promised	•	Minus	**	= '	×	,25	•	OR	x,50.	FEE	
SEN SEN SEN SEN SEN SEN SEN SEN SEN SEN	independent proministing		Minus	414 .	=	_	<u> 100</u>		OR	x 5200		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,16(d))					-	518O.		OR	. 360.		
						T	OTAL DO'L FEE		OR	TOTAL ADD'L FEE		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

"If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fife (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for returning thurden, should be sent to the Chief Information Officer; U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22311-1450.

If you need assistance in completing the form, call 1-600-PTO-9199 and select option 2